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TIME: _____

YOUR REF.: 09/702,229

TO: Examiner Victor R. Kostack

COMPANY: U.S. Patent and Trademark Office

FROM: Kenneth N. Nigon/Tonya M. Berger

FAX TELEPHONE: 1-703-872-9314

OFFICE TELEPHONE: _____

TITLE OF DOCUMENT: Amendment in Response to Office Action Dated March 4, 2003

Total Number of Pages: 15 (including this form)

COMMENTS

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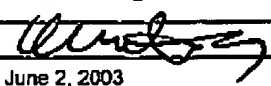
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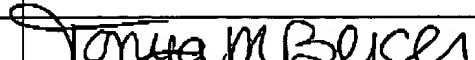
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/702,229
	Filing Date	October 31, 2000
	First Named Inventor	Todd S. Bowser
	Art Unit	2611
	Examiner Name	Victor R. Kostak
Total Number of Pages in This Submission 14	Attorney Docket No.	MATP-586US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please Identify below):
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Firm or Individual	Kenneth N. Nigon	Registration No. (Attorney/Agent) 31,549
Signature		
Date	June 2, 2003	

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Name (Print/Type)		Tonya M. Berger	
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		June 2, 2003	

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Appln. No. 09/702,229
Amendment Dated June 2, 2003
Reply to Office Action of March 4, 2003



MATP-596US

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mail
6/6/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No: 09/702,229
Applicant: Todd S. Bowser
Filed: October 31, 2000
Title: TELEVISION RECEIVER WITH SHARED DATA PORT AND CONTROL SOFTWARE
TC/A.U.: 2611
Examiner: Victor R. Kostack
Confirmation No.: 1290
Docket No.: MATP-596US

AMENDMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated **March 4, 2003**, please amend the above-identified application as follows:

- ☐ Amendments to the Specification begin on page _____ of this paper.
- ☒ Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.
- ☐ Amendments to the Drawings begin on page _____ of this paper and include an attached replacement sheet(s).
- ☐ Amendments to the Abstract are on page _____ of this paper. A clean version of the Abstract is on page _____ of this paper.
- ☒ Remarks/Arguments begin on page 6 of this paper.